

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCILIMPORTANT: Indicate type of committee you are reporting for: 4(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support State of Candidates**CANDIDATE COMMITTEES ONLY:**

Candidate Name

MARY DAVIS

Political Party

Office Sought

CITY COUNCIL

NOV - 1 2003

District (if Senate or House)

SIGNATURE OF TREASURER (or person filing this report)

278-8047
TELEPHONE10-30-03
DATE SIGNED

FORM

DR-2

(Rev. 07/2003)

DISCLOSURE
REPORT**For Office Use Only**

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:I AM FILING A 10-30-03 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date)Indicate one 1☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

11-4-03

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HANDCASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) \$ 0**ADD TOTAL MONEY TAKEN IN THIS PERIOD**Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) \$ \$ 760.00Schedule F: Loans Received total (Attach Schedule F) \$ 0Schedule H: Total Sales of Campaign Property (Attach Schedule H) \$ 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

SUBTRACT TOTAL MONEY SPENT THIS PERIODSchedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) \$ 0Schedule F: Loan Repayments total (Attach Schedule F) \$ 0CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ \$ 760.00

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ _____

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ _____

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ _____

CANDIDATE COMMITTEES ONLY:CONSULTANT BREAKDOWN (Schedule G Attached?) ☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

For Instructions, See Back of Form

CONTRIBUTIONS — MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(5), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9/21/03	ID# CK#	BILL SHOOK	—	\$ 100 ⁰⁰	<input type="checkbox"/>
9/28/03	ID# CK#	BILL WAGNER		25 ⁰⁰	<input type="checkbox"/>
9/28/03	ID# CK#	RICHARD MOTT		50 ⁰⁰	<input type="checkbox"/>
10/5/03	ID# CK#	DENNIS COON		50 ⁰⁰	<input type="checkbox"/>
10/5/03	ID# CK#	GAYLE LANDIS 5563 NW 57 AVE JOHNSTON, IA 50131		25 ⁰⁰	<input type="checkbox"/>
10/12/03	ID# CK#	JEANNE JENNINGS 8700 WINDSOR PKWY JOHNSTON, IA 50131		80 ⁰⁰	<input type="checkbox"/>
10/12/03	ID# CK#	WALT TOMENGA 7250 HYPERION PT. JOHNSTON, IA 50131		50 ⁰⁰	<input type="checkbox"/>
10/19/03	ID# CK#	MARY BEDNAR 7011 FOREST DR. JOHNSTON, IA 50131		100 ⁰⁰	<input type="checkbox"/>
10/26/03	ID# CK#	HELEN LARSON 6110 TERRACE DR. JOHNSTON, IA 50131		10 [—]	<input type="checkbox"/>
10/26/03	ID# CK#	ANTHONY DUNSKY 5120 NW 66 AVE JOHNSTON, IA 50131		100 ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

\$ 590⁰⁰

TOTAL (If last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)**COMMITTEE NAME** (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

SCHEDULE

A

(Rev. 07/03)

MONETARY
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AMENDING FORM**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

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10/16/03	ID# CK#	DENNIS COON 7201 HYPERION PT. JOHNSTON, IA 50131		\$ 50 ⁰⁰	<input type="checkbox"/>
10/16/03	ID# CK#	ELIZABETH KERBER 6900 NORTHGIENN WAY JOHNSTON, IA 50131		50 ⁰⁰	<input type="checkbox"/>
10/16/03	ID# CK#	THOMAS FEY 5608 KENSINGTON CIR. JOHNSTON, IA 50131		20 ⁰⁰	<input type="checkbox"/>
10/31/03	ID# CK#	MADILYN ALLENDER 5100 NW 62ND AVE JOHNSTON, IA 50131		50 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 170⁰⁰

TOTAL (if last page of this schedule)

\$ 760⁰⁰

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Page 2 of 2
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCILIMPORTANT: Indicate type of committee you are reporting for: 4(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
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(8) Support State of Candidates**CANDIDATE COMMITTEES ONLY:**

Candidate Name

MARY DAVIS

Political Party

Office Sought

CITY COUNCILNOV - 7 2003

District (if Senate or House)

Boyle Landis

SIGNATURE OF TREASURER (or person filing this report)

278-8047

TELEPHONE

10-30-03

DATE SIGNED

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(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

SUBTRACT TOTAL MONEY SPENT THIS PERIODSchedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... \$ 0Schedule F: Loan Repayments total (Attach Schedule F)..... \$ 0CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)..... \$ \$ 760.00**UNPAID BILLS (From Schedule D - Attach Schedule D)..... \$ 1967.03

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)..... \$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... \$

CANDIDATE COMMITTEES ONLY:CONSULTANT BREAKDOWN (Schedule G Attached?) ☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
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9/28/03	ID# CK#	BILL WAGNER		25 ⁰⁰	<input type="checkbox"/>
9/28/03	ID# CK#	RICHARD MOTT		50 ⁰⁰	<input type="checkbox"/>
10/5/03	ID# CK#	DENNIS COON		50 ⁰⁰	<input type="checkbox"/>
10/5/03	ID# CK#	GAYLE LANDIS 5563 NW 57 AVE JOHNSTON, IA 50131		25 ⁰⁰	<input type="checkbox"/>
10/12/03	ID# CK#	JEANNE JENNINGS 8700 WINDSOR PKWY JOHNSTON, IA 50131		80 ⁰⁰	<input type="checkbox"/>
10/12/03	ID# CK#	WALT TOMENGA 7250 HYPERION PT. JOHNSTON, IA 50131		50 ⁰⁰	<input type="checkbox"/>
10/19/03	ID# CK#	MARY BEDNAR 7011 FOREST DR. JOHNSTON, IA 50131		100 ⁰⁰	<input type="checkbox"/>
10/26/03	ID# CK#	HELEN LARSON 6110 TERRACE DR. JOHNSTON, IA 50131		10 [—]	<input type="checkbox"/>
10/26/03	ID# CK#	ANTHONY DUNSKY 5120 NW 66 AVE JOHNSTON, IA 50131		100 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 590 ⁰⁰	
TOTAL (If last page of this schedule)				\$	

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Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

SCHEDULE

A

(Rev. 07/03)

MONETARY
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10/26/03	ID# CK#	DENNIS COON 7201 HYPERION PT. JOHNSTON, IA 50131		\$ 50 ⁰⁰	<input type="checkbox"/>
10/26/03	ID# CK#	ELIZABETH KERBER 6900 NORTHGIENN WAY JOHNSTON, IA 50131		50 ⁰⁰	<input type="checkbox"/>
10/26/03	ID# CK#	THOMAS FEY 5608 KENSINGTON CIR. JOHNSTON, IA 50131		20 ⁰⁰	<input type="checkbox"/>
10/31/03	ID# CK#	MADILYN ALLENDER 5100 NW 62ND AVE JOHNSTON, IA 50131		50 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 170⁰⁰

TOTAL (if last page of this schedule)

\$ 760⁰⁰

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Page 2 of 2
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "Incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
9/26/03	MARY DAVIS 6917 N.W BEAVER JOHNSTON, IA. 50131	Press CITIZEN (AD)	\$ 92.00
9/26/03	" "	SAM'S CLUB (POST CARDS XEROX*)	38.75
9/27/03	" "	OFFICE DEPOT ----- Office Supplies	34.53
9/28/03	" "	OFFICE DEPOT ----- ENVELOPES / COPY SERVICE	47.31
9/28/03	" "	HY-VEE ----- STAMPS	259.32
9/29/03	" "	U.S Post Office STAMPS	185.00
10/3/03	" "	US POST OFFICE STAMPS	111.00
SUB-TOTAL			\$ 767.91
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 3
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YY)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
9/12/03	MARY DAVIS 6917 NW BEAVER JOHNSTON, IA 50131	FAST SIGNS YARD SIGNS	\$ 212.53
9/26/03	" "	" "	212.53
10/5/03	" "	HY-VEE STAMPS	111.00
10/8/03	" "	KINKO'S FLYERS	163.98
10/9/03	" "	U.S. POST OFFICE STAMPS	74.00
10/15/03	" "	PRESS CITIZEN AD	92.00
10/20/03	" "	KINKO'S	160.58
SUB-TOTAL			\$ 1026.62
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1794.53

*If actual figure is unknown, show "estimated" beside the figure.

Page 2 of 3
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DAVIS FOR COUNCIL

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

An "Incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/ 24/ 03	MARY DAVIS 6917 NW BEAVER JOHNSTON, IA 50131	Press CITIZEN --- -- Ad	\$ 172.50
SUB-TOTAL			\$ 172.50
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1,967.03

*If actual figure is unknown, show "estimated" beside the figure

Page 3 of 3
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

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